



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, V CORPS
UNIT 29355
APO AE 09014

AETV-GAS

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: V Corps Accident Reduction Emphasis (CARE) Roundtable #2 AAR

1. The second V Corps CARE Roundtable was conducted on 16 November 2004 at the Pavilion on Patrick Henry Village (PHV) from 1000 to 1500 hours.

2. All V Corps MSC's and Separate Brigades were tasked to provide members. The 1AD has established its own forum and is not participating directly with other Corps-level units.

3. Summary of second Round Table:

a. The session was opened with a brief background on Victory Corps CARE initiatives and introductions of participants. The members engaged in open discussion regarding what they perceived to be the definition of an "army accident". Members also discussed why accidents can be attributed to Leader, Training, Standards, Support and Individual Failures.

b. The Soldiers were then divided into five groups of four to five members. Each group was tasked to provide input on "Why accidents occur?". The groups identified the following: Leader failure, inattention, high OPTEMPO, inadequate time, fatigue, alcohol/drugs, excessive speed, complacency, limited Soldier/operator experience, inadequately maintained equipment and poor road conditions. Specific differences in Europe contributing to POV/AMV mishaps included excessive speed, confusion with international signs for navigation purposes, limited lighting of roadways, numerous/ongoing road construction projects and localized environmental conditions. Each group leader and facilitator was the junior Soldier in the group. The groups then presented their observations to the roundtable for open discussion.

c. The members then completed the "Next Accident Assessment for Individuals" and the USAREUR "Driver's Risk Assessment Questionnaire". Each Group Leader then completed the "Next Accident Assessment for Leaders" on all members of his/her group. Each group was tasked to provide input on how these "assessment surveys" could be improved and to come up with recommendations on how to mitigate individual Soldier risk levels. Of the 19 Soldiers assessed; nine (9) Soldiers were Low Risk, five (5) were Moderate Risk and five (5) were High Risk. The five groups collectively made the following observations:

1) The surveys had good and bad points. However, none "truly assessed the Soldier both on and off-duty" in and of itself. Soldiers felt that portions of all three surveys need to be consolidated into a single survey to allow leaders to gain a true picture of the "Whole Soldier".

2) Surveys are not compatible with FRG members. Spouses felt that it would be beneficial to have this assessment apply to family members for future FRG utilization.

3) Did not feel that “low GT scores” should automatically result in a higher risk Soldier.

4) Soldiers felt that surveys need to delve deeper into the “off-duty Soldier”. They felt that many of our “High Risk Soldiers” are good Soldiers. They believed these same Soldiers would be identified as “lower risk” in “on-duty focused survey”, even though they regularly participate in high risk off-duty behavior.

d. Open discussion was conducted on “why some units have low number of DUI’s, high morale and few AMV/POV accidents”. Member observations follow:

1) Good Unit-level discipline and high standards.

2) Soldiers are “peer-pressured” to maintain individual responsibility and ultimately feel “pride in and responsibility for their unit”.

3) Safety Briefings occur frequently which are fun, interactive, contain ‘interesting information’ and Soldiers freely share ‘war stories’.

4) Mass punishment is not effective. Individual infractions should be strongly dealt with by unit leadership in a consistent manner for all ranks.

5) Good unit commanders take the time to conduct and do not ‘delegate’ mandated safety briefings.

6) Soldiers felt that ‘gory posters/slideshows’ were an effective tool in getting safety points across but should be placed in tasteful areas and not overdone.

7) Soldiers felt that using DUI-FREE and SAFETY Streamers for unit-level achievements in accident/DUI-prevention is a good idea to help build positive ‘unit attitudes’, increase visibility of collective unit safety achievements and provide emphasis on maintaining high standards both on and off duty. Streamers should be placed on and/or removed from unit guideons during unit formations.

e. Members discussed ways that leadership directives/info can get down to the individual Soldier. Comments follow:

1) Soldiers are very familiar with Bell Sends Messages and some units even require that Soldiers sign tracking sheets to show review of content.

2) Soldiers liked the CARE-GRAM Concept. Soldiers recommended that CARE-GRAMS be signed by both the Corps Commander and CSM and be directly sent down to the Company

Commander/1SG Levels. Soldiers feel that hearing contents of CARE-GRAMS verbally from company-level leadership and then having them posted on company-level bulletin/safety boards is the best way to get information down to the individual Soldier level. Soldiers feel that company-level leadership can better change Soldier Misconceptions in this way.

3) The Round Table members agreed that:

- a. TV Spots based on the CARE Program and CARE / SAFETY hotline is a great idea.
- b. Stars and Stripes and local ASG papers are a good way to get CARE initiatives viewed by both Soldiers and family members.
- c. CARE-GRAMS posted in PX, Commissary, Sick Call, Mess Hall areas would provide high visibility for CARE / SAFETY Hotline and CARE-GRAMS.
- d. Integration of the Guardian Angel Program fully into the FRG side of the house, and particularly into the Re-Integration Process would be an effective tool for the Soldiers and their families.
- e. Pre-Deployment/Deployment phases are 'rushed'. They felt that if Pre-Deployment Planning is adequate, the week prior to actual Soldier deployment should be a 'light work week'. This will greatly reduce short and long-term stress on Soldiers and family members.
- f. Unit leadership must identify 'at-risk Soldiers' prior to redeploying back to Central Region (CR) to allow leadership to mitigate residual risk levels of identified 'at-risk Soldiers' prior to hitting the ground in CR.
- g. It would benefit units to begin conducting Winter/Summer Safety Campaign directed training and driver's training prior to redeploying back to CR to minimize the stress of reintegration and unit recovery.
- h. Corps should track family member fatality/injury/accident statistics like we do on the military side of the house and incorporate lessons-learned into FRG meetings and/or Guardian Angel Program.
- f. The V Corps Deputy AG, LTC Brlecic, addressed the roundtable. He expressed his appreciation for their participation and stressed the importance of their contributions to the Round Table Forum. He stated that many of their great ideas may very well become command policy. LTC Brlecic noted the importance of visible incentive awards for both individual and unit awareness of safety goals and fostering positive unit attitudes. LTC Brlecic charged each of them to be a positive influence on safety when they return to their unit and to help identify their at-risk peers and intervene when appropriate.
- g. All roundtable members felt that the session was a very positive, beneficial experience. They enjoyed the open forum without rank. The atmosphere was open and receptive to all

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thoughts presented. Each Soldier expressed their appreciation for LTC Brlecic taking time out of his schedule to share his thoughts on safety.

4. The next Safety Roundtable will convene on 25 January 2005 at the Patrick Henry Village Pavilion in the Presidential Room from 1000-1500 hours.

5. The CARE Round Table agenda will be expanded to incorporate ACV/AMV accident prevention discussion.

6. Point-of-Contact is CW4 Bob Petty, V Corps CARE Program Director/Aviation Safety Officer at 370-5664 or Robert.petty@hq.c5.army.mil.

7. VICTORY CORPS!


EDWARD J. HOFFMAN JR.
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